

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707025

Entity Name: THE FLORIDA STATE DEMOLAY ASSOCIATION, INC.**Current Principal Place of Business:**164 NIGHTINGALE CIRCLE
ELLENTON, FL 34222-4254**Current Mailing Address:**164 NIGHTINGALE CIRCLE
ELLENTON, FL 34222-4254 US**FEI Number:** 59-1271058**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LEVAN, CHARLES M
164 NIGHTINGALE CIRCLE
ELLENTON, FL 34222-4254 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name BERRY, STEPHEN M
Address 2910 KELLY FOREST PARKWAY
STE D4-395
City-State-Zip: MICCOSUKEE CPO FL 32309

Title TD
Name LEVAN, CHARLES M
Address 164 NIGHTINGALE CIRCLE
City-State-Zip: ELLENTON FL 34222-4254

Title SECRETARY, DIRECTOR
Name MEGUIAR, JEROME M
Address 145 W DAVIS BLVD
City-State-Zip: TAMPA FL 33606-3539

Title DIRECTOR
Name GRAULICH, ALLAN J
Address 214 FLAGLER AVE
City-State-Zip: EDGEWATER FL 31232-2110

Title D
Name LYNN, RICHARD E
Address 220 N OCEAN ST
City-State-Zip: JACKSONVILLE FL 32202-3218

Title VPD
Name GLENDINNING, RUSSELL B
Address 4496 GOLDEN LAKE DRIVE
City-State-Zip: SARASOTA FL 34233

Title DIRECTOR
Name MEGUIAR, ROBERT J
Address 3303 W PRICE AVE
City-State-Zip: TAMPA FL 33611-3722

Title DIRECTOR
Name MARTI, WILLIAM A
Address 5509 VAN BUREN ST
City-State-Zip: HOLLYWOOD FL 33021-7165

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHARLES M. LEVAN**TREASURER/DIRECTOR** 02/24/2014

Electronic Signature of Signing Officer/Director Detail

Date